

**EXHIBIT F**

FORM B19 (Revised Form 10/4/98)

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF Delaware

Name of Debtor

W.R. Grace & Co.

Case Number

01-1139

Name of Creditor (The person or other entity to whom the debtor owes money or property).

UTAH POWER LIGHT

Name and Address where notices should be sent\*

UTAH POWER LIGHT

PO BOX 25308

SALT LAKE CITY UT 84125-0308

- ☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.
- ☐ Check box if you have never received any notices from the bankruptcy court in this case.
- ☐ Check box if the address differs from the address on the envelope sent to you by the court.

THIS SPACE IS FOR COURT USE ONLY

Telephone Number:

1-800-221-7010

Account or other number by which creditor identifies debtor:

513053416 001Check here if ☐ replaces ☐ amends a previously filed claim, dated \_\_\_\_\_

## 1. Basis for Claim

- ☐ Goods sold
- ☐ Services performed
- ☐ Money loaned
- ☐ Personal injury/wrongful death
- ☐ Taxes
- ☒ Other Utilities

- ☐ Retiree benefits as defined in 11 U.S.C. § 1114(a)
- ☐ Wages, salaries, and compensation (fill out below)
- Your SS #: \_\_\_\_\_
- Unpaid compensation for services performed from \_\_\_\_\_ to \_\_\_\_\_ (date) (date)

## 2. Date debt was incurred:

## 3. If court judgment, date obtained:

## 4. Total Amount of Claim at Time Case Filed:

\$ 1375.58

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below.

☐ Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.

## 5. Secured Claim.

☐ Check this box if your claim is secured by collateral (including a right of setoff).

Brief Description of Collateral:

- ☐ Real Estate ☐ Motor Vehicle
- ☐ Other \_\_\_\_\_

Value of Collateral: \$ \_\_\_\_\_

Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ \_\_\_\_\_

## 6. Unsecured Priority Claim.

- ☐ Check this box if you have an unsecured priority claim
- Amount entitled to priority \$ \_\_\_\_\_
- Specify the priority of the claim:
- ☐ Wages, salaries, or commissions (up to \$4,300)\* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3).
- ☐ Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4).
- ☐ Up to \$1,950\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6).
- ☐ Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7).
- ☐ Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).
- ☐ Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(\_\_\_\_).

\*Amounts are subject to adjustments on 4/1/01 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

## 7. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.

## 8. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.

## 9. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

Date

5/16/01

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):

Stacy DavisWadmer Service  
Stacy Davis

THIS SPACE IS FOR COURT USE ONLY

Please mail this claim form to:  
U.S. Bankruptcy Court  
400 South Main St., Rm. 341  
Salt Lake City, Utah 84101\*Enter the day, pre-printed text is incorrect  
AND type or print correct informationU.S. BANKRUPTCY COURT  
DISTRICT OF DELAWARE

2 p.m.

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

WR Grace

BF.1.2.98

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**Agrmt # 51305346 001 001 W R GRACE & CO CONN****----- Agreement Details -----**

**Agrmt Type** Service Agreement    **Stat Cod** WAT Rev Cls COM Connect 01-10-1994  
**Rate Sched** 08GNSV0006.004 GENERAL SERVICE, 3 PHASE, SECON Disconnect 04-02-2001  
**Site Addr** FREEPORT BLDG # J5-N FREEPORT CENTER UT 84016  
**Svc Descr** Agr Dsc UTAH GENERAL SERVICE, DISTRIB

**----- Billing/Payment Transactions -----**

Tranx	Date	Rev	Mo	Type	Adj	Transaction Details	Tranx Amt	Agrmt Bal
05-16-2001	05	01	RBL			Usage up to 4-2-01	600.90	1348.64
03-10-2001	03	01	RPY			CSH# 000000390176332	-756.45	774.68
03-09-2001	03	01	RBL			RSCH 08LPAY0300.001	7.56	1531.13
03-09-2001	03	01	RBL			RSCH 08GNSV0006.004	767.12	1523.57
02-07-2001	02	01	RBL			RSCH 08LPAY0300.001	0.14	756.45
02-07-2001	02	01	RBL			RSCH 08GNSV0006.004	742.61	756.31
02-01-2001	02	01	RPY			CSH# 000000729103582	-713.55	13.70
02-01-2001	02	01	RPY			CSH# 000000729103582	-6.14	727.25
01-10-2001	01	01	RPY			CSH# 000000358493496	-749.89	733.39
01-09-2001	01	01	RBL			RSCH 08LPAY0300.001	7.56	1483.28
01-09-2001	01	01	RBL			RSCH 08GNSV0006.004	719.69	1475.72
12-07-2000	12	00	RPY			CSH# 000000273340667	-614.37	756.03
12-07-2000	12	00	RBL			RSCH 08LPAY0300.001	6.14	1370.40
12-07-2000	12	00	RBL			RSCH 08GNSV0006.004	749.89	1364.26
11-04-2000	11	00	RBL			RSCH 08GNSV0006.004	614.37	614.37
10-30-2000	10	00	RPY			CSH# 000000921381373	-711.39	0.00
10-05-2000	10	00	RBL			RSCH 08GNSV0006.004	711.39	711.39
10-02-2000	10	00	RPY			CSH# 000000094476054	-729.72	0.00
10-02-2000	10	00	RPY			CSH# 000000094476054	-717.17	729.72